

Heterogeneity in realization of short-term fertility intentions across Europe

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The realization of fertility intentions varies greatly across Europe. Zsolt Spéder and Lajos Bálint find that labour market stability, low inflation, strong welfare state involvement, and cultural attitudes emphasizing the role of the individual all support greater realization of short-term fertility intentions.

Intending to have children and actually having them is not the same, as demographers know well, at least since the pioneering follow-up study of Westoff and Ryder (1977). The “fertility gap”, as Chesnais (1998) called it, highlights the distance between people’s “ideas” about desired family size (ideals, aspirations, plans, intentions) and their actual number of children. Over the past decade, several analyses have documented the extent of this gap and searched for explanations at macro, cohort and individual levels. These analyses show that desires do not always become intentions and that intentions vary over time, especially when circumstances change, e.g. in terms of employment, or couple stability. Besides, adherence to intentions may also differ, and postponement is often an option.

GGs and short-term fertility intentions

Follow-up data collections provide excellent opportunities to examine whether the intentions declared at a given point in time will later be put into practice. This is one of the stated objectives of the Generations and Gender Survey (GGs), launched in the 2000s (Vikat et al. 2007). In order to link intentions and realization as closely as possible, the GGs asks whether respondents would like to have children within the next three years, i.e. by the time of the next scheduled round of interviews.

In a recent study (Spéder & Bálint 2024) exploiting the GGs harmonized multi-country data and focusing on 11 European countries with at least two consecutive waves of data collection (Austria, Bulgaria, Czech Republic, France, Georgia, Germany, Hungary, Lithuania, Poland,

Russia, and Sweden), we examined intercountry difference in the realization of fertility intentions and identified some of the social factors associated with such differences. Data were collected between 2004 and 2012, but we considered only the first two consecutive waves, with the first one generally occurring in 2004–2005, or shortly after. We focused on female respondents aged 21–45 years and males having a partner aged 21–45 at the time of the first wave, excluding pregnant women and men with a pregnant partner.

Table 1 shows how we created our variables of interest, namely realization (“positive and negative realizations”) and failure rate of those intending to have another) child but not having one (“short-term fertility gap”).

Table 1. Classification of respondents by intention to have a child at time 0 and realization by time 3

Intention to have a(n)other child within 3 years (t_0)	Outcome at t_3 (births in the three-year interval)		Total
	1+ Births	0 births	
YES Intends to have	Positive realization (2,273)	Failure (Short-term “fertility gap”) (6,613)	100% (8,886)
NO Does not intend to have	Failure (Unplanned birth) (779)	Negative realization (19,042)	100% (19,821)

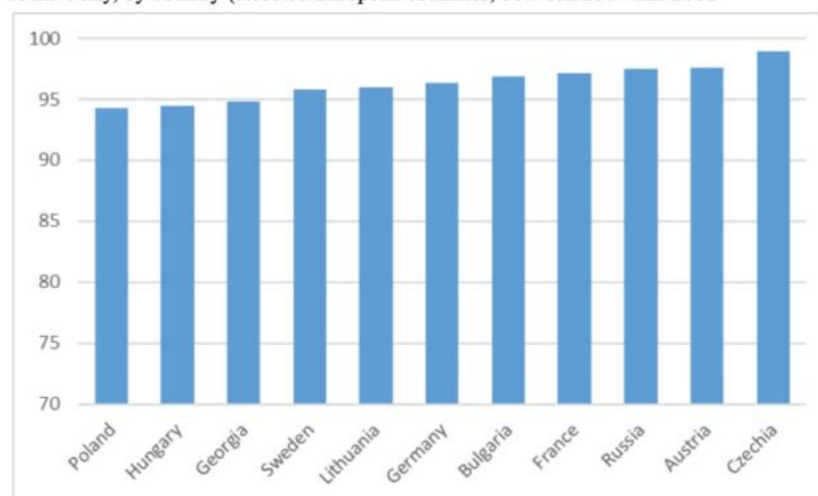
Notes. Number of cases in parentheses. Success and failure rates calculated by row. A birth is considered to be a (positive) realization of an intention if it occurred between the 7th and 36th month after the first survey, when the intention was declared.

Source: own calculations, GGS first and second wave (Spéder & Bálint, 2024)

High negative realization rate, varying positive realization rate

In the vast majority of cases (94–99%), those who did not intend to have a child in the next three years did not have any, (Figure 1). This is not surprising, and aligns with earlier findings (Testa and Toulemon 2006: 56).

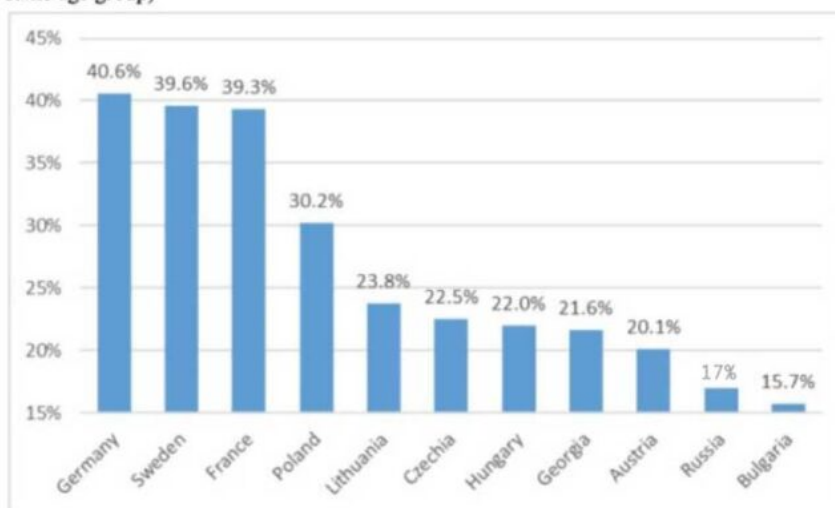
Figure 1. Share of those not having a child within three years among those not intending to have any, by country (selected European countries, between 2004 and 2012)



Source: own calculations, GGS first and second waves (Spéder & Bálint, 2024)

When positive intentions are declared, however, the success rate varies widely across countries: short-term fertility intentions were frequently realized in Germany, France and Sweden (39–41%), but more rarely elsewhere, especially in Bulgaria and Russia (16% and 17.0% respectively; Figure 2). It is interesting to note that three neighbouring countries with very different social systems – Austria, the Czech Republic and Hungary – have very similar levels of fertility realization.

Figure 2. Share of respondents having a child within three years among those who intended to have one (selected European countries, women aged 21–44 years partnered with men of the same age group)



Source: own calculations, GGS first and second wave (Spéder & Bálint, 2024).

Two things should be kept in mind when looking at the seemingly low positive success rate. First, in some countries, but not in all, two positive responses to the intention question were possible: “Definitely yes” and “Probably yes”. To maximise the number of countries, here and in our scientific paper (Spéder & Bálint, 2024), we merged the two cases. Not surprisingly, in the countries where the two cases can be analysed separately, the realization rate of those who answered “definitely yes” is higher, although country heterogeneity and country ranking barely change (not reported here). Second, among respondents who are very unlikely to have a birth in the near future (e.g., partners who do not cohabit), quite a few nonetheless say that they intend to have a child in the next three years. This, of course, reduces the success rate.

Factors that facilitate or hinder implementation of fertility intentions

It is not easy to determine what factors affect the success rate of fertility intentions, and how they act, i.e. by weakening the link between intentions and realization, by modifying the original intentions or by hindering their realization. Economic dynamics, for instance, seem to play a role: variations in youth unemployment and inflation, two possible indicators of uncertainty, reduce the success rate. Welfare provisions also play their part: a higher share of GDP devoted to social protection in general, and to families and children in particular, increases the likelihood of realization.

Finally, cultural factors matter. Among them, beliefs about the private nature of the decision to have a child prove to be the most significant: the stronger the support for the idea that “people should decide for themselves to have children”, the greater the likelihood of respondents having the intended child. In other words, in societies with a weaker belief that

having a child is also a public matter, people are less likely to “overstate” their fertility intentions.

References

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